

RONALD FANTOZZI

17 OF 18



STYLE OF CASE: Michael W. Harris, et al.

vs.

Purdue Pharma L.P., et al.

CASE NO: C-1-01-428

PERTAIN TO: Ronald Fantozzi

FROM: DeRosa and Chamberland Eye Care
633 Main Street
Lewiston, ME 04240-5938
(207) 783-8243

DELIVER TO: Mr. Phillip J. Smith
VORYS, SATER, SEYMOUR & PEASE, LLP
Atrium Two, Suite 2100
221 East Fourth Street
Cincinnati, OH 45202

THE ENCLOSED DOCUMENTS CAN BE IDENTIFIED BY NUMBERS 500685094-0001
THROUGH 500685094-0006.

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13105 NORTHWEST FREEWAY SUITE 300 HOUSTON TEXAS 77040 (T) 713 460 9070 (F) 713 460 6519 800 264 9070

WWW.MARKER-HOFF.COM

OPTOMETRIC RECORD

Ronald Fantozzi
PATIENT'S NAME

ADDRESS 40 Poland Rd

BUS. PHONE

RES. PHONE

782-3873

REFERRED BY

WHERE EMPLOYED

AGE

SEX

DATE

39

M

1-4-02

LAST EYE EXAM

O.D.B.

11-4-97

-62

PATIENT'S STATEMENT
OF COMPLAINTS
☐ RETURNING DUE TO PRIOR OCULAR DIAGNOSIS

DY BLUR / NY BLUR

HVS

FLASHES / FLOATERS - NEW / LONGSTANDING

MENTAL STATUS: NORMAL / OTHER

ALLERGIES

PHYSICAL
CONDITION:

ASTHMA

EMPHYSEMA

CANCER

MS

THYROID

CORU

STAMING

CORNEA

ANTERIOR CHAMBER

ANGLES

IRIS

LENS

CONTACT LENSES

DIAGNOSIS:

TREATMENT PLAN:

LIPPING

VESSELS

MACULA

BACKGROUND

MEDIA

SPH

CYL

AX

PRISM

ADD

O.D.

O.S.

SPH

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CURRENT RX

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SPH.

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PRISM

1 Both Eyes	T	R	R	L	T	B	L	R	L	B	R	B	T
2 Right	T	L	T	T	B	B	L	B	R	T	R	L	B
3 Left	L	R	L	B	R	T	T	B	R	T	B	R	T
Snellen Equivalents	20	20	20	20	20	20	20	20	20	20	20	20	20
	200	100	70	50	40	35	30	25	22	20	18	17	15
4 Stereo Depth	B	L	B	B	T	T	L	R	L	R	L	R	R
5 Color	A	12	B	B	C	C	D	D	E	E	F	F	O
6 Vertical	BU	OD	.	2	3	4	5	6	7	8	9	10	11
7 Lateral	1	2	3	4	5	6	7	8	9	10	11	12	13
	ESD	5	6	3	2	1	0	1	2	3	4	5	EXO
12 Lateral	1	2	3	4	5	6	7	8	9	10	11	12	13
	1	2	3	4	5	6	7	8	9	10	11	12	13

Screening

CONTACT LENS REGIMEN

PATIENT'S LENS CARE ☐

PATIENT USING LENSES

OVER REFRACTION OVER

☐ OTHER:

EVALUATION OF FUNDUS PHOTOS:

DATE 1-16-02 pt nsd pic/DFE (10)

1-16-02 - Lm w/ Dtr to Call us back to Resc.

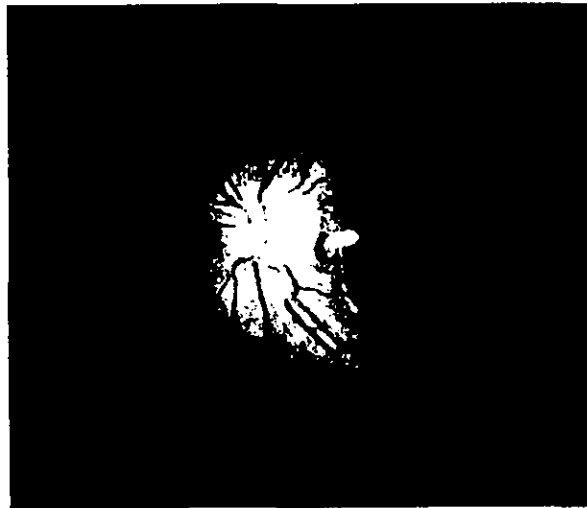
1-29-02 - Spoke w/ pt - Said he would call us back today. did not call back - N

8-21-02 pt nsd DFE/PIC (13)

Zur



Title
Date 1/4/02



Title
Date 1/4/02

NAME —

Ronald Fantozzi

DATE —

On 9-12-94
 Ron's wife ^(mom) called
 said Ron's eye
 worst do you
 want to see him
 or just ref him
 she said you
 mentioned preferring
 him JXC

9/13/94 I called + (dr) from
~~that~~ today

DATE —

SEP 13 1994

✓ VA WMA
 "VA 20/20
 20/30"

Called Patient
 No also need
 referral for
 9/13 visit
 (ad) 9/15/94

Sept 15 — Called Dr. Bologn on ref

DATE —

OFFICE INFORMATION

DEROSA AND CHAMBERLAND EYECARE
633 MAIN STREET
LEWISTON, ME 04240-5938

PHONE: (207) 783-8243
ID : 01-0476297

RONALD M FANTOZZI
40 POLAND RD
AUBURN, ME 04210

PATIENT INFORMATION

RONALD M FANTOZZI

DOB: 08/62
Sex: M

CODE	DIAGNOSIS
361.30	RETINAL DEFECT WITHOUT TE
362.41	CENTRAL SEROUS CHOROIDOPA
362.41	CENTRAL SEROUS CHOROIDOPA

PATIENT FINANCIAL HISTORY

STMT. DATE	BALANCE DUE
08/26/2003	.00

Date	Description	Proc	Insurance			Patient		
			Charges	Credits	Balance	Charges	Credits	Balance
05/18/94	006 EYE EXAM EST PATIENT	92014			0.00	56.00		56.00
05/18/94	914 BILLED TO RS		48.00		48.00		46.00	10.00
05/18/94	912 PAYMENT BY CASE				46.00		10.00	0.00
07/11/94	936 PAYMENT BY INSURANCE C RS			40.00	5.00			0.00
07/11/94	908 INSURANCE ADJUSTMENT RS			6.00	0.00			0.00
09/07/94	021 OFFICE CALL EST-LDNGTE	92012			0.00	34.00		34.00
09/07/94	035 FUNDUS PHOTOGRAPHY (1-	92250			0.00	18.00		50.00
09/07/94	914 BILLED TO RS		40.00		40.00		40.00	10.00
09/07/94	912 PAYMENT BY CASE				40.00		10.00	0.00
09/07/94	912 PAYMENT BY CASE				40.00		10.00	10.00
09/13/94	021 OFFICE CALL EST-LDNGTE	92012			40.00	34.00		44.00
09/13/94	914 BILLED TO RS		24.00		64.00		24.00	20.00
09/13/94	912 PAYMENT BY CASE				64.00		10.00	10.00
10/20/94	936 PAYMENT BY INSURANCE C RS			40.00	24.00			10.00
11/16/94	936 PAYMENT BY INSURANCE C RS			24.00	0.00			10.00
11/30/94	998 MONTHLY FINANCE CHARGE				0.00	0.15		10.15
12/30/94	998 MONTHLY FINANCE CHARGE				0.00	0.15		10.30
01/31/95	998 MONTHLY FINANCE CHARGE				0.00	0.15		10.45
02/08/95	907 PATIENT ADJUSTMENT				0.00		10.45	0.00
11/04/97	006 EYE EXAM EST PATIENT	92014			0.00	58.00		58.00
11/04/97	914 BILLED TO RS		48.00		48.00		48.00	10.00
11/04/97	912 PAYMENT BY CASE				48.00		10.00	0.00
12/12/97	936 PAYMENT BY INSURANCE C RS			40.00	8.00			0.00
12/12/97	908 INSURANCE ADJUSTMENT RS			8.00	0.00			0.00
01/04/02	438 EYE EXAM - NEW	92002			0.00	85.00		85.00

PAGE: 1

500685.094.0005

OFFICE INFORMATION

DEROSA AND CHAMBERLAND EYECARE
 633 MAIN STREET
 LEWISTON, ME 04240-5938
 PHONE: (207) 783-8243
 ID : 01-0476297

RONALD M FANTOZZI
 40 POLAND RD
 AUBURN, ME 04210

PATIENT INFORMATION

RONALD M FANTOZZI

DOB: [REDACTED] 62
 Sex: M

CODE	DIAGNOSIS
361.30	RETINAL DEFECT WITHOUT TE
362.41	CENTRAL SEROUS CHOROIDOPA
362.41	CENTRAL SEROUS CHOROIDOPA

PATIENT FINANCIAL HISTORY

STMT. DATE 08/26/2003 BALANCE DUE .00

Date	Description	Proc	Insurance			Patient		
			Charges	Credits	Balance	Charges	Credits	Balance
01/04/02	915 BILLED TO CIGNA HEALTH CIG		75.00		75.00		75.00	10.00
01/04/02	912 PAYMENT BY CASH				75.00		10.00	0.00
02/27/02	936 PAYMENT BY INSURANCE C CIG			40.00	35.00			0.00
02/27/02	908 INSURANCE ADJUSTMENT CIG			35.00	0.00			0.00
09/03/02	269 EG RX GIVEN OUT				0.00	0.00		0.00

> 30 DAYS	> 60 DAYS	> 90 DAYS	PRIOR BAL	FINANCE CHG	CHARGES	CREDITS
					283.45	283.45
PLEASE MAKE US AWARE OF ANY PROBLEMS WITH YOUR GLASSES WITHIN 30 DAYS. WE WILL MAKE EVERY EFFORT TO CORRECT THEM.						BALANCE DUE
						.00
LEE U DE ROSA, OD, PA			License	623TAG	PAGE: 2	



STYLE OF CASE: Michael W. Harris, et al.

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CASE NO: C-1-01-428

PERTAIN TO: Ronald Fantozzi

FROM: DeRosa and Chamberland Eye Care
633 Main Street
Lewiston, ME 04240-5938
(207) 783-8243

DELIVER TO: Mr. Phillip J. Smith
VORYS, SATER, SEYMOUR & PEASE, LLP
Atrium Two, Suite 2100
221 East Fourth Street
Cincinnati, OH 45202

Best Copy Possible Per Custodian

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OPTOMETRIC RECORD

ADDRESS

40 Poland Rd

BUS. PHONE

PATIENT'S NAME

Ronald Santozzi

RES. PHONE

782-3873

REFERRED BY

WHERE EMPLOYED

D.O.B.

AGE

35

SEX

M

DATE

11-4-97

OCULAR HISTORY

PATIENT'S STATEMENT OF COMPLAINTS

DV BLUR

Good

NV BLUR

SG off to Red

HAS

FLASHES

FLOATERS

ALLERGIES

PHYSICAL CONDITION

ARE YOU TAKING ANY KIND OF TREATMENT?

LAST EYE EXAM

O.D.

NAKED VISION

O.S.

TIME

INTRAOCULAR

TENSION

OPHTHALMOSCOPY

OPTIC NERVES

CUPPING

VESSELS

MACULA

BACKGROUND

ERROR

- 1.25 -0.50 108*

ERROR

ERROR

ERROR

ERROR

- 1.00 -0.50 110

L (UD:12.0)

- 0.62 -0.37 75

- 0.75 -0.62 69*

- 0.50 -0.75 71

RET	O.S.	
SUBJ	O.D.	-100-50 90 D.D. 20/20
	O.S.	-50-75 68 O.S. 20/25
	ADD	NEAR VA
DLP	NLP	NPRA
DVP	NVP	

CURRENT RX

5-94

SPH.

CYL.

AX

PRISM

ADD

O.D.

-150

-50

105

O.S.

-50

-75

60

SLIT LAMP EXAM

LIDS

CORNU

STAINING

CORNEA

ANTERIOR CHAMBER

ANGLES

IRIS

LENS

CONTACT LENSES

ASSESSMENT

PLAN:

Central serous on off for 3 yrs.
He has had myopia over 20 yrs never less than 4 mm

He tested himself all the time.

Amber grad as [11]

note: I told him to get an eye exam for his eyes call for exam consult.

R. Santozzi

FINAL RX	SPHERE	CYLINDER	AXIS	PRISM	ADD
O.D.	-100	-50	90		
O.S.	-50	-75	68		

[illegible]



STYLE OF CASE: Michael W. Harris, et al.

vs.

Purdue Pharma L.P., et al.

CASE NO: C-1-01-428

PERTAIN TO: Ronald Fantozzi

FROM: Neurosurgical Associates
99 Campus Avenue, Suite 303
Lewiston, ME 04240
(207) 777-4460

DELIVER TO: Mr. Phillip J. Smith
VORYS, SATER, SEYMOUR & PEASE, LLP
Atrium Two, Suite 2100
221 East Fourth Street
Cincinnati, OH 45202

THE ENCLOSED DOCUMENTS CAN BE IDENTIFIED BY NUMBERS 500685095-0001
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WWW.MARKER-HOFF.COM

KEITH B. QUATTROCCHI, M.D., Ph.D., P.A.

NEUROLOGICAL SURGERY

NEURO-ONCOLOGY

99 CAMPUS AVENUE, SUITE 303 • LEWISTON, MAINE 04240

Telephone (207) 777-4460 • FAX (207) 777-4466

*Diplomate of the American Board
of Neurological Surgery*

*Clinical Associate Professor
University of North Carolina*

*Member
American Association of
Neurological Surgeons
Congress of Neurological Surgeons*

March 15, 1999

Ronald Snyder, M.D.
12 High Street
Lewiston, ME 04240

RE: Ronald Fantozze
DOB: [REDACTED] 62

Dear Dr. Snyder:

I had the pleasure of seeing your patient, Mr. Ronald Fantozze. As you remember, he is a 36-year-old gentleman with Crohn's disease. Evidently, he has undergone at least two surgical interventions including, as described by the patient, a one and a half foot colon resection 13 years ago, and 10 years ago, a cholecystectomy and appendectomy.

He has had intermittent episodes of rather severe cramping and dull pain in the right lower quadrant over the past few years. Evidently, these would resolve, but approximately one year ago he began having severe right lower quadrant pain with severe cramping and evidently this has not improved. He has been seen by Dr. Snyder and is currently being treated with Oxycontin at I believe, a dose of 40 mgs p.o. b.i.d. The patient appeared to me during the examination, to be rather comfortable, but states that the pain is severe and states that it involves the right lower quadrant and described it both as sharp and dull at different times in the conversation and also is cramping. He states that a colonoscopy was done six months ago and was unremarkable.

PAST MEDICAL HISTORY: Significant for Hepatitis C. He denies myocardial infarction, stroke, diabetes, or hypertension. He has a history of Crohn's disease as previously noted.

MEDICATIONS: Include Oxycontin and Prednisone as well as an antidepressant. The patient does not know the doses of his medications and does not know what type of antidepressant he is on.

ALLERGIES: Unknown.

500685.095.0001

Ronald Fantozze
page 2

REVIEW OF SYSTEMS: Skin and integument: No complaints of lesions or other abnormalities.

Head and Neck: Please see neurological findings.

Cardio: The patient does not complain of shortness of breath, palpitations or chest pain.

GI: No complaint of weight loss or change in stool habits or patterns.

GU: Unremarkable, no new complaints.

Extremities: No complaint of leg swelling or extremity pain.

PHYSICAL EXAMINATION: The patient is a well-developed, well-nourished male in no apparent distress. Lungs: Clear to auscultation and percussion.

Cor: Regular rate and rhythm. No rub, murmur or gallop.

Abdomen: Soft and nondistended. Bowel sounds present. No hepatosplenomegaly.

GU: Deferred at the request of the patient.

Extremities: No clubbing, cyanosis or edema.

Neurologic exam: The patient is awake, alert and oriented without speech or memory deficits. Head and neck exam is unremarkable. The patient has no carotid bruits. Cranial nerves II-XII are intact. Motor exam reveals 5/5 strength throughout. There is no pronator drift. Sensory exam reveals no evidence of hypesthesia or sensory extinction. Reflexes are 2+ throughout with downgoing toes bilaterally.

IMPRESSION: Mr. Fantozze presents with a severe pain in the right lower quadrant. The description of his pain was somewhat inconsistent during my examination. I am obviously somewhat concerned by that fact. In addition, I am concerned by the fact that he looked rather comfortable throughout the interview despite his description of his pain being unbearable.

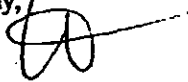
RECOMMENDATION: Unfortunately, I was unable to talk to you today as you were out of town, but I did have a chance to talk with Dr. Monzel. Dr. Monzel is obviously concerned that his pain is continuing and would like to see him again and we have contacted the patient to set up an appointment with Dr. Monzel. I will be seeing the patient after he has seen you and also completed his evaluation with Dr. Monzel. I would also recommend that he have a psychological evaluation performed. Certainly patients with chronic pain can be quite difficult to read, but I have to say that I was concerned with discrepancies between the amount of pain that the patient stated he was having and his general affect. Perhaps this was just a result of the Oxycontin, but I think this would bare further evaluation, especially if we are going to consider any invasive procedures. In addition, the evaluation by Dr. Monzel will be very important and perhaps there are some other underlying issues regarding his Crohn's disease which should be looked at and I am quite thankful that Dr. Monzel will be seeing him back regarding this. I have also asked the patient to discuss with you whether or not he might benefit from a higher dose of Oxycontin. He does not appear to have any mental status changes as a result of his current dosing and perhaps this would be something worth considering.

Ronald Fantozze
page 3

I have asked him to discuss this with you. I will be seeing him back after he is evaluated by Dr. Monzel and yourself and again, I would strongly recommend that we consider psychological testing to see whether or not he shows the type of ego and behavioral characteristics that would likely benefit from chronic pain treatment with an intrathecal Morphine pump, should this become necessary.

I wish to thank you for referring this very interesting patient to my attention. Please don't hesitate to contact me if you have any questions.

Sincerely,



Keith B. Quattrocchi, M.D., Ph.D.

KBQ/dls

cc: Dr. Monzel

500685.095.0003



STYLE OF CASE: Michael W. Harris, et al.

vs.

Purdue Pharma L.P., et al.

CASE NO: C-1-01-428

PERTAIN TO: Ronald Fantozzi

FROM: Central Maine Orthopaedics
690 Minot Avenue, Suite One
Auburn, ME 04210
(207) 783-1328

DELIVER TO: Mr. Phillip J. Smith
VORYS, SATER, SEYMOUR & PEASE, LLP
Atrium Two, Suite 2100
221 East Fourth Street
Cincinnati, OH 45202

THE ENCLOSED DOCUMENTS CAN BE IDENTIFIED BY NUMBERS 500685096-0001
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THE MARKER-HOFF GROUP, INC

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WWW.MARKER-HOFF.COM

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003/004

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF OHIO

Michael Harris, et al.

vs.

Purdue Pharma L.P., et al.

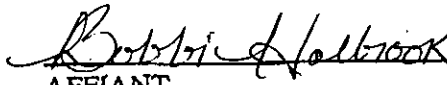
:
:
: Case No. C-1-01-428
:
:

Records pertaining to: Ronald Fantozzi

Custodian of Records For: Central Maine Orthopaedics

I have conducted a thorough search of our files for the requested records, including but not limited to: patient intake forms and health questionnaires, and/or consent forms, and/or physical examination records, and/or x-rays, and/or pathology slides and/or blocks, and/or all nurses notes and physicians notes, and/or treatment records and reports, and/or prescription records, and/or third-party consultation records, and/or records of treatment at hospitals and other health care providers, and/or test results from outside laboratories, and/or itemized billing records, and/or insurance claims forms, and or personnel records and/or payroll records, and/or academic records, and/or correspondence.

I certify that nothing has been removed from the original file before releasing copies of these records or the originals. The records I am releasing are the original records or exact duplicates of the original records and include each and every record contained in the file on the above-named individual.


AFFIANT

WITNESS

8-27-03
DATE

Central Maine Orthopaedics, P.A.

OFFICE VISIT

HECTOR J. ROSQUETE, M.D.

RONALD M. FANTOZZI

DATE OF BIRTH: [REDACTED] 62


DATE OF SERVICE: 3/23/99

HISTORY: Mr. Fantozzi returns to the cast room today complaining that his fiberglass splint that was fabricated last week is uncomfortable and also had been damaged by his dog who chewed it up.

I have fabricated a new splint for him. He states that it was rather uncomfortable over the MP joint of the index finger. I have padded this area with reston and he is much more comfortable with this now.

PLAN: He will continue using the splint and will come out of the splint for gentle range of motion exercises and for hygiene purposes several times a day. He has an appointment with Dr. Kendall at the end of the month for a work-up. He will follow-up with Dr. Rosquete after his appointment with Dr. Kendall. He will call the office in the interim if there are any further questions, concerns or problems.

Randall N. Shaw, OTC for



Hector J. Rosquete, M.D.

RNS/taa
Dictated, not proofread

PC: Michael Boulanger, M.D.

Central Maine Orthopaedics, P.A.

OFFICE VISIT

HECTOR J. ROSQUETE, M.D.

RONALD M. FANTOZZI

DATE OF BIRTH: 62

DATE OF SERVICE: 3/18/99

HISTORY: Mr. Fantozzi returns today. He was seen for synovitis involving the left MP of the left index finger. He has a history of Crohn's disease. His synovitis is much improved today. There is much less tenderness. He complains of some decreased sensation over the MP. He has a volar brace which is fitting well. It's just a little bit too long and this is trimmed.

PLAN: The patient states he's had a previous history of kidney stones but denies any other aches or pains except for aching along the right flank for which he is being treated by Dr. Snyder with OxyContin. It is felt to be due to Crohn's disease. It is felt that he would benefit from evaluation by one of the rheumatologists. He will be referred to Dr. Kendall as per request. He can continue with his Ibuprofen and can start coming out of his splint for gentle range of motion exercise and personal hygiene.

HECTOR J. ROSQUETE, M.D.

HJR/TAIB/PTA

Dictated, not proofread

pc: Michael Boulanger, M.D.

Central Maine Orthopaedics, P.A.

OFFICE VISIT

HECTOR J. ROSQUETE, M.D.

RONALD FANTOZZI

DATE OF BIRTH: [REDACTED] 62

DATE OF SERVICE: 03/16/99

HISTORY: Mr. Fantozzi is seen at the request of Dr. Boulanger with swelling over the metacarpal phalangeal joint of the left index finger. The patient is a 36-year-old right-handed gentleman who had been seen on 08/13/98 with synovitis of the left index at the metacarpal phalangeal joint. The patient was referred to Dr. Kendall at that time as he has a history of Crohn's disease. Unfortunately, the patient did not seek medical attention. He recalls on Friday opening a door and somehow injuring the metacarpal phalangeal joint of his left index. The following day he noted swelling and erythema. He presented to the emergency room at St. Mary's Regional Medical Center. He was given a splint and referred to Dr. Boulanger. He denies any puncture wounds, any abrasions or any insect bites. He complains of pain across the metacarpal phalangeal joint of the index finger aggravated with range of motion. He does have a history of Crohn's disease. He is on Oxycontin and followed by Dr. Snyder for persistent pain. The patient does recall many years ago he had fractures of his hand for which Dr. Marcotte placed a pin across the index, middle, ring and little fingers.

PHYSICAL EXAMINATION: Examination demonstrates some swelling and synovitis over the dorsal aspect of the hand. There is pain with range of motion and stiffness.

X-RAY EVALUATION: X-rays from St. Mary's Regional Medical Center from 03/14/99, on the oblique demonstrate a cystic-like area near the index finger metacarpal metaphysis which may represent the previous K-wire site. No other abnormalities are noted.

IMPRESSION: The patient presents with synovitis at the metacarpal phalangeal joint of the left index finger. The question is whether this is inflammatory versus infectious. The patient does have a history of Crohn's disease but has no history of immune deficiency nor any portals of bacterial entry.

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RONALD FANTOZZI
DATE OF SERVICE: 03/16/99
PAGE 2

PLAN: The patient is splinted. He was started on ibuprofen 100 mg t.i.d. with meals. We will see him back this Thursday for evaluation. It may be very helpful if this is, indeed, inflammatory in nature for the patient to be seen by one of the rheumatologists.

HECTOR J. ROSQUETE, M.D.

HJR/TAIB/FJT
Dictated, not proofread

Pc: Michael Boulanger, M.D.

500685.096.0004

Central Maine Orthopaedics, P.A.

OFFICE VISIT

HECTOR J. ROSQUETE, M.D.

RONALD M. FANTOZZI

DATE OF BIRTH: [REDACTED]/62

DATE OF SERVICE: 08/13/98

HISTORY: Mr. Fantozzi is a 36-year-old, right-handed gentleman seen in consultation for Ms. Ferland with pain at the MP joint of the left index finger. The symptoms began approximately three weeks ago at work. By 9:00 in the morning, he noted pain. The next morning, it was swollen like it was broken. He presented to the health center and was started on an exercise program. The swelling decreased but as soon as he returned to work, he started having pain. The patient works doing injection molding. He makes soles for boots. He uses his hands a lot. He has to bang open molds and feels he may have damaged the MP joint of the index finger doing this maneuver. It hurts more at the end of the day.

Past medical history: Crohn's disease and status post partial colectomy. He has a history of bronchitis. He had a previous fracture to the distal radius 20 years ago.

Medications: None.

Allergies: None.

Family history: No family history of degenerative arthritis. His mother died due to heart disease.

Social history: The patient is a nonsmoker. He denies any other joint aches or pains. His wife is a smoker.

PHYSICAL EXAMINATION: Physical examination demonstrates no suggestion of psoriasis. There is some mild swelling at the MP of the left index finger. There is extension of +15 and flexion of 85. At the index, there is flexion of 90 degrees. The other digits, including the middle, ring, and little fingers, and the right index finger, there is MP flexion of 85 degrees. There is no tenderness to palpation.

X-RAY EVALUATION: X-rays obtained today demonstrate an erosion on the ulnar base of the proximal phalanx of the left index finger.

ASSESSMENT: The patient presents with what appears to be synovitis at the MP of the left index, with juxta-articular erosion. He has a history of Crohn's disease. There is no suggestion of psoriasis. There is also a history of trauma and overuse.

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RONALD M. FANTOZZI

08/13/98

Page 2

PLAN: I think it would be of great benefit to have this gentleman evaluated by Dr. Kendall for his synovitis. In the meanwhile, I think he would benefit from use of a padded glove, padding the MP joint. He also has pain with abduction of the fingers. He was given a velcro buddy strap to prevent abduction.

HECTOR J. ROSQUETE, M.D.

HJR/TAIB/VW

Dictated, not proofread

pc: Occupational Health and Rehabilitation

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